PTO/SB/08A (08-00)

Substitute for form 1449A/PTO  INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)					Complete if Known					
					Application Number Filing Date First Named Inventor Group Art Unit		09	/822,961		
							03/30/2001			
							BUNGER			
							3627			
					Examiner Name		Fawaad Haider			
Sheet	1	of	1		Attorney Docket Number		134779.13101			
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Examiner Initials	Cite No.	N Ki	U.S. Patent Documer  Number  Kind Code  (if known)			Name of Patentee or Applicant of Cited Document		Date of Publication of Cited Document MM-YYYY		
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Examiner Signature			, ,			Date Considere	ed			

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>&</sup>lt;sup>1</sup> Applicant is to place a check mark here if English language Translation is attached.